

APS Narrative Guides

Contact Detail

Workers should document all contacts made with persons or organizations involved in an investigation. All persons, organizations, or agencies with information about an investigation or a stake in the investigation should be contacted.

In each contact the worker should designate who was contacted, who made the contact (DHHS or Law Enforcement) and the date/time of the contact. The location of the contact should be entered (e.g. John Doe's Home, Memorial Hospital, etc.) If others are present during the person contact those people should be listed. If a person or organization is not contacted or declines to participate in a contact, the worker should indicate so and the reasons for not contacting or not participating in the investigation.

<u>Reasons Organizations can decline to participate</u>	<u>Reasons Why Persons not contacted:</u>
Civil Matter (i.e. Law Enforcement)	Unable to Locate
Independent Investigation (Not working directly with APS)	Requested by Law Enforcement or Attorney
Out of Jurisdiction	Refuses Contact
Inadequate Personnel	
No Response	

Comments should be made on each contact, summarizing what was discussed during the contact. This space is limited and does not replace the narrative. The contact list will display the first part of your comments, so it is a good idea to start off with descriptive information that will help you see at a glance where you need to go to find the narrative information for the contact.

Examples of Contact Comments:

First face-to-face contact: Assessed vulnerability.

Interview with perpetrator: Discussed allegations.

Recording contacts through the Person Contact and Organization Contact allows N-FOCUS to gather data showing that the worker contacted those involved in an investigation, met the time frames for contacting persons, the number of contacts made, and the data showing persons and organizations not contacted or declining to participate and the reasons why they were not contacted or declined to participate.

Persons in Investigation

Workers are able to add persons related to the Investigation to the N-FOCUS function whether or not they were included in the intake or are on the system. When a person is on the N-FOCUS system the worker should add the N-FOCUS person to the investigation.

When a person is not in the system, the worker can still add them to an investigation using the person of interest function (without creating a new N-FOCUS person). The worker will only need limited information to add a person to the investigation and can update that information as it is gathered. For instance, last names are not always known

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at the beginning of an investigation so the worker may enter the first name and add them. The worker may also enter a description of the person to help identify them. When adding a person to the investigation the worker will select the person's role in the investigation.

<i>Person roles in an investigation:</i>	
Alleged Victim	Power of Attorney
Alleged Perpetrator	Family Member
Witness - Caregiver	Neighbor
Facility Staff	Medical Professional
Guardian	Collateral Contact

Example of Person w/ Description:

First Name: Bob Last Name: 'unknown' Role: Alleged Perpetrator Description: Bob is a very tall white male with unkempt brown hair. He lives the next door to the victim.

The worker may end date a person's involvement in an investigation. This may occur if the person has a limited role in the investigation and no further involvement is needed. The worker may also remove a person from involvement in the investigation. This should only be done if the worker has not had any contact with the person and it is found that they do not have any involvement or association with the investigation.

Organizations in Investigation

Workers are able to add organizations related to the Investigation to the N-FOCUS function whether or not they were included in the intake. Organizations in the intake will be available to add to the investigation. If the intake has an incorrect organization or another organization is involved in the investigation, the worker can correct the organization or add additional organizations. The worker will only be able to add organizations currently on the system. The worker is also able to update the role of the organization in the investigation.

<i>Organization roles in an investigation:</i>	
Allegation involved	Referral
Allegation site	Residence
Employer	Service Provider
Law Enforcement	

The worker may end date an organization's involvement in an investigation. This may occur if they have a limited role in the investigation and no further involvement is needed. The worker may also remove an organization from involvement in the investigation. This should only be done if the worker has not had any contact with the organization and it is found that they do not have any involvement or association with the investigation.

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Investigation Narratives

Contact Narratives

Contact Narratives can be the most essential piece of an investigation/assessment. In many cases they are the primary source of testimonial evidence given to the worker that can support or refute allegations. Contact narratives can include direct quotes of the people being contacted, direct observations by the worker, and descriptions of any information shared or received during the contact.

These contact narratives should be written clearly and concisely and the worker should avoid entering information that is not pertinent to the investigation. N-FOCUS will automatically enter the date the narrative was created, however the worker must enter the date which the contact actually occurred into the occurrence date section.

Efforts to Locate Victim

The worker should document any efforts to locate the victim when the initial visit is unsuccessful. This documentation will show that the worker made a 'good faith' effort to locate the victim should the worker not be able to locate the victim after subsequent efforts. The worker should make multiple efforts to locate the victim trying at different times of the day and utilizing others who may know their whereabouts.

<i>Efforts to locate the Alleged Victim can include:</i>	
Multiple home visits	Visiting with neighbors
Telephone calls	Talking with reporter
Utilizing the Post Office	Sending a certified letter
Collateral contacts	Talking with known service providers
Law Enforcement	DMV Records
Utilities	N-Focus
NDEN-Criminal Justice Information System	Child Support Enforcement/CHARTS

If a victim cannot be located the worker must consult with their supervisor before closing the case as Unable to Locate.

Alleged Victim Contact/Interview

Workers should document each of these contacts/interviews with the alleged victim. These documentations include the first face-to-face contact made by the worker and each subsequent contact or interview made by the worker. During the initial contact the worker should first determine the vulnerability of the adult (when possible), then proceed to investigating the maltreatment, and finally determining recommendations for services. While there are guidelines listed for establishing rapport, these should not be documented, only information pertinent to the case should be included in the documentation.

Alleged Perpetrator Contact/Interview

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Workers should document each contact/interview with the alleged perpetrator. In most cases, in order for an investigation to be considered complete, the alleged perpetrator should be interviewed or attempted to be contacted/interviewed. The contacts/interviews with the alleged perpetrator should address each allegation involving that alleged perpetrator and any other relevant information that the alleged perpetrator can provide.

Witness Contact/Interview

When conducting an investigation, the worker should interview any witnesses to the alleged maltreatment. Witnesses include any persons who have direct knowledge of the incident, i.e. the saw the act occurring, saw the alleged victim or perpetrator immediately following the incident, heard the alleged perpetrator admit to the act, etc. Many times witnesses include family members, facility staff, other residents, neighbors, bank employees, etc. The information obtained during these contacts can be essential to corroborate, support, or refute the report, the alleged victim's statements, or the alleged perpetrator's statements.

Collateral Contact/Interview

Interviewing collateral contacts may be necessary in an investigation for a variety of reasons. Some of these reasons may include getting a medical opinion about vulnerability, having a medical professional interpret diagnoses/medical notes/etc., getting an expert opinion on financial or legal issues involved in the case, or finding out background information from family, friends, and professionals who have knowledge about the alleged victim or alleged perpetrator, but no direct knowledge about the incident. Many times collateral contacts include medical professionals, financial institution employees, law enforcement, and can include family members, neighbors, etc.

Guardian Contact/Interview

When an alleged victim involved in a case has a guardian, the worker should contact the guardian of the alleged victim. The contact with the guardian may be for a variety of reasons including informing them of the investigation (if they are not the alleged perpetrator), gathering information about the victim, receiving consent to initiate emergency services, etc. In cases where the guardian is the alleged perpetrator, contact may be documented in this section regarding their fulfillment of guardianship duties or lack of and their perspective about the situation.

Team Meetings

Team meetings involving interested parties of the alleged victim should be documented as well. The documentation should show where the meeting occurred and who was present at the meeting. Team meetings can include a wide variety of individuals and can be utilized to work from a Family/Person Centered practice and should include the alleged victim whenever possible.

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Evidence Narratives

Evidence Narratives are utilized to record evidence gathered throughout the course of an investigation, not including testimonial evidence (which is documented in the contact narratives).

The evidence narratives should be written clearly and concisely and the worker should avoid entering information that is not pertinent to the investigation. In some instances the worker may use the narrative to list evidence included in the investigation instead of narrating each item, especially in cases where there is an abundance of information that can be found in the case file and it is too cumbersome to describe each piece. N-FOCUS will automatically enter in the date the narrative was created, however the worker must enter the date which the evidence was actually gathered into the occurrence date section.

Documentary Evidence

Documentary evidence is the most common type of evidence gathered for investigation other than testimonial evidence. Documentary evidence preserves a person's or agencies actions or statements that were not given directly to the investigator.

Some of the most common types of documentary evidence may include correspondence, law enforcement reports, medical records, facility reports, financial records, legal records, etc.

When documenting this type of evidence, the worker should record in the narrative the following: from whom the documents were received, what type of information was received, a summary of the evidence, and how the evidence supports or refutes the allegations or determination of vulnerability. Workers should avoid typing or copying the entire document into the narrative as many times there is irrelevant information that is not needed. Instead the worker should either summarize the relevant parts of the document or use bullets to list important pieces.

Demonstrative Evidence

Demonstrative evidence is evidence that can be used to preserve physical evidence and can be found in the form of photographs, maps, diagrams or pictures, or other descriptions of the incident location, etc.

When documenting this type of evidence, the worker should record in the narrative the following: when and who created the evidence, (who took the picture, etc., the date, what form the evidence is in [photograph, body map, etc.]), when the evidence was received, a summary of the evidence, and how it supports or refutes the allegations or determination of vulnerability.

Physical Evidence

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In most cases physical evidence is not gathered by the worker since it is not easily included in a case record. Law enforcement or forensic personal will most likely be the agency that gathers physical evidence.

In this section the worker can record and describe any physical evidence that law enforcement gathers or that they came into contact with during the course of an investigation. This record should include when the evidence was seen, what it looked like, and how it supports or refutes the allegations.

Screening Tool Narratives

Screening tools are assessments that the worker utilizes to determine various aspects surrounding an alleged victim and/or the alleged maltreatment. In most APS cases the assessment will be used to assist in determining the vulnerability of the alleged victim.

Assessments alone should not be used to determine vulnerability, but should be used in conjunction with the workers observations, medical records or reports, witness statements, etc. This section should be used to narrate any tools utilized and their results. The worker should describe if the result of the tool supports or refutes vulnerability or any other measure that the tool is attempting to provide results.

Environment

Describe tool(s) used to assess the environment: include the results or conclusions drawn from this tool.

Behavioral Health

Describe tool(s) used to assess behavioral health (Geriatric Depression scale, substance use screening, etc.): include the results or conclusions drawn from these tools including how it supports/refutes vulnerability.

Physical Functioning

Describe tool(s) used to assess physical functioning (Daily Living Activities screening, Instrumental Activities of DL screening, etc.): include the results or conclusions drawn from these tools including how it supports/refutes vulnerability.

Cognitive Functioning

Describe tool(s) used to assess cognitive functioning (Mini-mental Status, Short Portable Mental Status, FROMAJE, Short ACED, etc.): include the results or conclusions drawn from these tools including how it supports/refutes vulnerability.

Caregiver Functioning

Describe tool(s) used to assess the caregiver(s) (Caregiver Abuse screening tool): include the results or conclusions drawn from this tool.

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Consultation Point

Case consultations are necessary throughout the course of most investigations. Consultations can be made between the worker and their supervisor, department administrator, or Central Office staff.

Mandatory consultation points are designed to provide formal opportunities for supervisors to coach, guide, support, and review case information during critical decision points throughout the life of a case.

In each consultation the worker must document the date and time of the consultation meeting; who was present including full name, title, and role; the purpose of the consultation; and a brief overview of events including final decision, reason for decision, supporting information, back-up plans, and actions that need taken.

Some actions taken during an investigation require mandatory consultations. Please see APS Policy Chapter 9.A for further information on specific consultation points.

Emergency Interventions

Workers should document each instance of when an emergency intervention is used during the course of an investigation. In the narrative the worker should summarize the situation requiring the emergency intervention and the result of the intervention.

Emergency Court Orders

These include Ex-Parte Orders, short-term involuntary adult protective services or involuntary temporary placement, or any other emergency action by the court system. Documentation should include type of order, date the order was made, who made the order, and the circumstances surrounding the order.

Law Enforcement Contact

This includes initial contacts by law enforcement in emergency situations, law enforcement EPC individual involved in investigation, interventions due to a threat of harm or refusal of access to the victim, or any other emergency actions by law enforcement. Documentation should include date, time, who made the contact, and a synopsis of the contact.

Other Emergency Contact

This includes emergency contacts other than law enforcement or court including, but not limited to emergency medical interventions, voluntary safety services or temporary placement. Documentation should include date, time, who made the contact, and a synopsis of the contact.

Appendix/Legal File

During the course of an investigation the worker may have contacts with various legal personnel. These contacts should be documented in this area and included in the Appendix of the paper case file if printed. The contacts may include working towards criminal charges or a civil suit including probate courts. This section is used to document contacts in which the attorney is working with or for the department or client.

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This documentation should include the date of the contact, a summary of information shared, and any decisions made. Contacts with opposing attorneys can be documented in collateral contacts.

Note: some contacts with legal parties are considered attorney-client privileged and are confidential. Other legal contacts are not considered confidential.

Contacts with legal include:

Private Attorney Contact

This is most often used during petitions for guardian/conservatorships (*this is not considered attorney-client privileged*).

Agency Legal Staff Contact

This is used when consulting with DHHS legal staff. **This information is attorney-client privileged and should not be shared outside the agency, even with other attorneys outside the agency.**

Prosecutor contact

This includes county attorneys, special prosecutors, attorney generals (information exchanged between DHHS and the attorney general is also considered attorney-client privileged and should be treated as such, but contact with others is not), etc.

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APS Investigation Summary

At the conclusion of the investigation, the CFS Specialist is responsible to create an investigation summary and if substantiated perpetrated abuse, neglect, or exploitation to forward the information to the county attorney and law enforcement.

The Investigation Summary contains sections where the worker summarizes the components of the investigation and states the conclusions made at the end of the investigation. The sections include narratives about the organization/provider, alleged victim, alleged perpetrator, safety response, maltreatment, and recommendations for services, to the county attorney, and to the organization/provider.

The Investigation Summary provides any reader a comprehensive picture of the investigation without having to read through each detail contained in the contact, evidence, other narratives or case file. The summaries can be especially useful when providing summaries to law enforcement, county attorneys, facilities, or anyone else who has a right to receive summaries of an APS investigation. The following sections will detail each domain topic and subtopics and what information should be summarized in each.

The Investigation Summary provides a comprehensive picture of the investigative process and the highlights of the investigation that lead to a conclusion.

SUMMARY NARRATIVES

The investigation summary contains the following sections	
Alleged Victim	Maltreatment Findings
Organization/Provider	Recommendations for Services
Safety Response	Recommendations to County Attorney
Alleged Perpetrator	Organization Recommendations
Evidence/Contact Summary	Other Recommendations

The following sections describe what is expected to be documented in each section.

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Alleged Victim

There are two determinations that should be described in this narrative:

<u>Determine Vulnerable Adult Status</u>	<u>Determine Decision Making Capacity</u>
<p>Document the conclusion of whether the alleged victim meets the definition of a vulnerable adult and the supporting reasons for the conclusion. Describe why the alleged victim is or is not vulnerable based on the definitions found in <u>Policy Chapter 2.A</u> and <u>NRS 28-348 to 28-387</u>.</p> <p>The documentation should also include the name and contact information of the guardian if applicable.</p> <p>More specific information about vulnerability can be found in <u>Policy Chapter 4.C</u>.</p>	<p>Document the conclusion about the adult's ability to make decisions. The CFS Specialist makes a conclusion about the vulnerable adult's ability to make decisions and understand the consequences.</p> <p>Document the vulnerable adult's ability to consent for services. When involving the Department in an adult's life consent is needed to provide services and as part of the investigation the worker should indicate whether the adult demonstrates the ability to consent to services.</p> <p>The documentation should include the name and contact information of any substitute decision maker (POA, payee, etc.) and should describe the reasons behind the appointment of this person if applicable.</p> <p>Additional information about Decision Making Capacity can be found in <u>Policy Chapter 4.C</u>.</p>

Organization/Provider (ORG ONLY)

Describe the prior history of abuse/neglect reports involving the organization or provider, factors that contributed to abuse/neglect including staffing patterns and activities of staff at time of the alleged incident, training of staff, policy/procedures, impact of other placements/residents to victim safety, and home or facility attitudes.

Safety Response

The CFS Specialist assesses for current safety and documents the conclusion in this section. Documentation includes a description of the circumstances or events affecting the safety of the vulnerable adult, a description of the development and implementation of a protective action either by the APS worker or the organization/family to reduce the risk to the vulnerable adult.

The worker uses this domain area to describe any conditions, events, or circumstances which place the vulnerable adult in a situation which is presently

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dangerous at the first face-to-face or at any time the worker is meeting with the client).

At the end of the investigation, the CFS Specialist will document the adult's current situation.

The worker uses this domain area to describe plans for eliminating or reducing the present or imminent danger to the vulnerable adult and obtaining safety services if needed, including any legal action that was sought.

Alleged Perpetrator

When there is an alleged perpetrator, the CFS Specialist will include the following information (when applicable):

- A description of the relationship of the alleged perpetrator to the vulnerable adult;
- Attitudes of the alleged perpetrator toward the vulnerable adult;
- Behavioral or emotional issues of the alleged perpetrator;
- Financial issues of the alleged perpetrator; and/or
- History of abuse or violence by the alleged perpetrator.

If the alleged perpetrator is a caregiver the worker should summarize their ability to care for the vulnerable adult, reasons for being a caregiver, satisfaction in role, or any other pertinent information about the caregiver role.

If the case is a self-neglect allegation or there is no identified perpetrator the worker should enter Not Applicable or N/A into the narrative.

Evidence/Contact Summary

In the Evidence/Contact summary, the CFS specialist will list or describe the critical pieces of information that led to the conclusion. In this domain area the worker analyzes all the information obtained and uses this section to describe the relevant evidence and contacts which support the findings.

This analysis of the information to sort what is relevant to the investigation decision from irrelevant information is essential for the investigation summary forwarded to law enforcement and county attorneys. This summary will make the most pertinent information readily available without having to read through each contact or evidence narrative.

Example:

The APS investigation involved direct contact with client, with a collateral person, who affirms that client has been doing very well and has not had a lot of problems, review of N-FOCUS records, contact with Aging Partners, and a referral for services.

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2-04-14	interview with alleged victim
2-05-14	interview reporter
2-10-14	interview perpetrator
5-16-14	letter from physician

-Worker interviewed victim in her home.
-Worker consulted with staff of AAA.
-Worker consulted with APS worker
-Worker talked to granddaughter by phone.
-Worker talked to granddaughter at the office.
-Worker consulted with staff Senior Center.

Maltreatment

After collecting and analyzing all the gathered information, The CFS Specialist will make a conclusion about the allegations. Documentation of the conclusions is found in the maltreatment section.

Maltreatment Findings

Succinctly summarize the allegations being investigated. In this narrative the worker will identify the following including statements of fact for each item:

For perpetrator related cases:

The statement of facts shows that:

The incident happened: (answer “yes” or “no”)

Wrong-doing was substantiated per statutory definitions: (answer “substantiated or unfounded”).)

For self-neglect cases:

The statement of facts shows that:

The incident happened: (answer “yes” or “no”)

Self-neglect was “Confirmed” or “Not Confirmed”.

- State the allegations; who did what to whom?
- State what evidence supports the allegation
- State what evidence refutes the allegation
- State undisputed evidence
- Describe the injury or imminent danger of physical injury.
- Document the vulnerable adult’s explanation as to how each injury occurred.
- What evidence shows the vulnerable adult was deprived of adequate nutrition, clothing, or health care?
- What evidence shows there was an injury or imminent danger of injury or death?
- If there isn’t an injury, what evidence or reasoning leads to the conclusion that a potential for injury existed?
- Did the alleged perpetrator accept the role of caregiver?

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- Does the alleged perpetrator have a contractual relationship with the alleged vulnerable adult/victim?
- What is the nature of the relationship or situation?
- Was alleged vulnerable adult/victim residing with the alleged perpetrator?
- Describe the conclusion and why.

Additional information about Maltreatment and Statements of Fact can be found in Policy Chapter 4.C.

Nature/Circumstances

Succinctly summarize the circumstances surrounding the maltreatment including dates, evidence, and analysis of fact. This section should be in narrative form and is intended to support the maltreatment findings. Include all relevant facts about the maltreatment and how it supports the finding(s). Include the following:

- Circumstances surrounding the identified maltreatment including who else may have been involved;
- An analysis of previous maltreatment and how it was resolved;
- Influences leading to maltreatment,
- Any perpetrator explanations of maltreatment, identified intent of maltreatment,
- Acknowledgement and attitude of the maltreatment.
- Other problems occurring in association with the maltreatment or

Recommendations for Services

In this domain area the worker will summarize the following:

- How or if the case will continue; if it will be closed with no services, referrals made, opened for ongoing services,
- A description of facility actions or recommendations to the facility.
- Specific services that are recommended and
- Why the services are needed for safety or to prevent abuse, neglect, or exploitation.

Document whether the CFS Specialist offered protective services and the alleged victim's decision to consent to or refuse services. If there is a substitute decision maker in place, the CFS Specialist documents their decision to consent to or refuse services. If no services are needed the worker may document that there is no need for consent for services.

Recommendations to County Attorney

The worker will document recommendations to the county attorney. This would include recommending prosecution due to having reasonable cause to believe that the crime has been committed. This may also include any recommendations for a mental health board hearing or other court action initiated by the county attorney.

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The Investigation Summary replaces the letter to the County Attorney and fulfills the regulation to inform the County Attorney of the investigation and findings. If the substantiated perpetrator is the victim's guardian, be sure to include this information.

Organization Recommendations (ORG Only)

The worker describes any recommendations made to the organization/provider to better provide for safety or prevent/discontinue abuse or neglect and also describe any actions that the organization/provider has already taken to provide safety or correct a situation.

Other Recommendations

The worker describes any other recommendations made during the course of the investigation/assessment including recommendations made to the Division of Public Health-Licensure Unit or other DHHS agencies.